



Express Mail No. EV 475 143 233 US

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application of: Fleischer and Reimer

Confirmation No.: 9935

Serial No.: 09/701,450

Art Unit: 1615

Filed: November 27, 2000

Examiner: Gollamudi S. Kishore

For: PREPARATIONS FOR THE APPLICATION OF  
ANTI-INFLAMMATORY, ESPECIALLY  
ANTISEPTIC AGENTS AND/OR AGENTS  
PROMOTING THE HEALING OF WOUNDS TO  
THE LOWER RESPIRATORY TRACT

Attorney Docket No: 11390-005-999

**PETITION FOR EXTENSION OF TIME UNDER 37 CFR § 1.136(a)**

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

It is respectfully requested that the time for a response to the Office Action dated  
March 28, 2006 be extended for a period of three (3) months from June 28, 2006 to and  
including September 28, 2006.

The fee for this extension is estimated to be \$1,020.00. Please charge the required  
fee to Jones Day Deposit Account No. 50-3013. A copy of this sheet is enclosed for  
accounting purposes.

Respectfully submitted,

Date: September 29, 2006

<u>Samuel B. Abrams</u>	30,605
Samuel B. Abrams	(Reg. No.)
<u>Henry P. Wu</u>	44,412
HENRY P. WU	(Reg. No.)
JONES DAY	
222 East 41 <sup>st</sup> Street	
New York, New York 10017	
(212) 901-9028	

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND					
1 Date of Request: <u>03/06/07</u>		2 Serial/Patent # <u>09/701,450</u>			
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT	
	Filing			\$	
	Amendment			\$	
X	Extension of Time 1253		09/29/06	\$ 1,020.00	
	Notice of Appeal/Appeal			\$	
	Petition			\$	
	Issue			\$	
	Cert of Correction/Terminal Disc.			\$	
	Maintenance			\$	
	Assignment			\$	
	Other			\$	
			7 TOTAL AMOUNT OF REFUND		\$ 1,020.00
			8 TO BE REFUNDED BY:		
			Treasury Check		
			X	Credit Deposit A/C #:	
			9	<div style="border: 1px solid black; display: inline-block; padding: 2px;"> 50--3013 </div>	
10 REASON:					
	Overpayment				
	Duplicate Payment				
X	No Fee Due (Explanation):				
The extension of time period is over; therefore, no extension fee is due.					
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME: <u>Iryin Dingle</u>		TITLE: <u>Paralegal</u>			
SIGNATURE: <u><i>Iryin Dingle</i></u>		PHONE: <u>2-3210</u>			
OFFICE: <u>Petitions</u>					
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****					
APPROVED: <u><i>CKH</i></u>		DATE: <u>3/7/07</u>			

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*